Case 18-34290-MBK Doc 32 Filed 01/28/20 Entered 01/28/20 14:29:35 Desc Main Document Page 1 of 7

Fill in this info	rmation to identify your	case:	
Debtor 1	Daniel K. Holt		
	First Name	Middle Name	Last Name
Debtor 2	Sandee E. Larser	1	
(Spouse if, filing)	First Name	Middle Name	Last Name
United States E	Sankruptcy Court for the:	DISTRICT OF NEW JE	RSEY TRENTON VICINAGE
Case number	18-34290-MBK		
(if known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

info	is complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	349,557.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	74,452.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	424,009.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	299,448.55
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	40,780.00
	Your total liabilities	\$	340,228.55
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,596.62
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,326.14
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	submit this form to
~			

Case 18-34290-MBK Doc 32 Filed 01/28/20 Entered 01/28/20 14:29:35 Desc Main Document Page 2 of 7

Debtor 1 Daniel K. Holt
Debtor 2 Sandee E. Lars

Sandee E. Larsen Case number (if known) 18-34290-MBK

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ 6,542.94

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this information t	o identify your case:	
Debtor 1	Daniel K. Holt	
Debtor 2 (Spouse, if filing)	Sandee E. Larsen	
United States Bankrup	tcy Court for the: DISTRICT OF NEW JERSEY TRENTON VICINAGE	
Case number [18-	34290-MBK	Check if this is: An amended filing A supplement showing postpetition chapter
Official Form	<u>106I</u>	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

0.00

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	☐ Employed	■ Employed
	attach a separate page with information about additional	Employment status	■ Not employed	☐ Not employed
	employers.	Occupation	Disabled	Technician
	Include part-time, seasonal, or self-employed work.	Employer's name		Fox TV Station
	Occupation may include student or homemaker, if it applies.	Employer's address		205 E. 67th Street NY 10665
		How long employed th	nere?	30 years
Par	Give Details About Mor	nthly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 6,542.94 deductions). If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. 0.00 Calculate gross Income. Add line 2 + line 3. 0.00 6,542.94

Official Form 106I Schedule I: Your Income page 1

	tor 1 tor 2	Daniel K. Holt Sandee E. Larsen			Cas	e number (if known)	_18	8-34290-M	ВК	
						or Debtor 1		For Debtor	pouse	
	Cop	by line 4 here	4.	•	\$_	0.00	,	∫ 6 ,	542.94	_
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	0.00	;	\$ 1,	188.85	
	5b.	Mandatory contributions for retirement plans	51	b.	\$	0.00	5	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	50	c.	\$	0.00	5	\$	0.00	_
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00		\$	0.00	_
	5e.	Insurance	56	e.	\$	0.00	,	\$	0.00	
	5f.	Domestic support obligations	51	f.	\$	0.00	,	\$	0.00	
	5g.	Union dues	5	g.	\$_	0.00			206.55	_
	5h.	Other deductions. Specify:	5I	h.+	\$_	0.00	+ 5	\$	0.00	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0.00	5	\$ 1 ,	395.40	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	0.00	,	\$5,	147.54	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.00	:	\$	0.00	
	8b.	Interest and dividends		b.	\$	0.00		\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a depending regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$	0.00		\$	0.00	_
	8d.	Unemployment compensation		d.	\$	0.00		\$	0.00	_
	8e.	Social Security	86	e.	\$	2,131.00	5	\$	0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	81		\$_	0.00		\$	0.00	_
	8g.	Pension or retirement income		g.	\$_	0.00	1	\$	0.00	_
	8h.	Other monthly income. Specify: Income tax refund (1/12th)	8I	h.+	\$_	318.08	+ 5	>	0.00	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	2,449.08	,	\$	0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	Ф		2.449.08 + \$		E 4 47 E 4	= \$	7 506 60
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ _		2,449.08 + \$_		5,147.54	= 5 -	7,596.62
11.	Incl othe	te all other regular contributions to the expenses that you list in Schedude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are cify:	your dep			•	-			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of Ciles							\$	7,596.62
13.	Do	you expect an increase or decrease within the year after you file this f	orm?					l	Combi month	ned ly income
		No. Yes. Explain:								

	in this informa	ation to identify yo	our case:					
Deb	otor 1	Daniel K. Ho	lt			Chec	ck if this is:	
							An amended filing	
	otor 2	Sandee E. La	arsen					ving postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bank	cruptcy Court for the	: DISTRI VICINA	CT OF NEW JERSEY TRI GE	ENTON	-	MM / DD / YYYY	
	e number 1 nown)	8-34290-MBK						
Of	fficial Fo	orm 106J						
So	chedule	J: Your	Exper	ises				12/15
Be	as complete ormation. If n	and accurate as	possible eded, atta	If two married people ar ch another sheet to this				
Par 1.	t 1: Desc Is this a joi	ribe Your House	hold					
1.	`							
	□ No. Go t		in a aanar	ata hayaahald2				
		es Debtor 2 live	ın a separ	ate nousenoid?				
	■ N		st file Offici	al Form 106J-2, <i>Expen</i> ses	s for Separate House	hold of Deb	tor 2.	
2.	Do vou hav	e dependents?	□ No					
	•	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	D 1 - 1 - 1	, d						□ No
	Do not state dependents				Son		16	■ Yes
					-		_	□ No
					Son		18	Yes
								□ No
					Daughter		21	■ Yes
					-			□ No
								☐ Yes
3.	expenses of	penses include of people other t nd your depende	han $_{m au}$	No Yes				
Est exp	imate your e	a date after the l	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the	lude expense value of suc ficial Form 1	h assistance an	non-cash d have ind	government assistance i luded it on <i>Schedule I:</i> \	f you know our Income		Your exp	enses
•		-						
4.		or home owners nd any rent for th		ses for your residence. I r lot.	nclude first mortgage	4. \$	·	1,803.14
	If not inclu	ded in line 4:						
		estate taxes				4a. \$		0.00
	•	erty, homeowner's				4b. \$		0.00
		e maintenance, re eowner's associat				4c. \$ 4d. \$		200.00
5.				our residence, such as ho	me equity loans	4u. \$ 5. \$		0.00 202.00
		5 5	. ,	.,	- 1. 7	- +		

	otor 1 otor 2	Daniel K Sandee	. Holt E. Larsen	Case nur	mber (if known)	18-34290-MBK
6.	Utilit	ies:				
	6a.	Electricity	, heat, natural gas	6a	. \$	300.00
	6b.	Water, se	wer, garbage collection		. \$	71.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c	. \$	125.00
	6d.	Other. Sp	ecify: Cell Phone	6d	. \$	100.00
7.	Food	d and hous	ekeeping supplies	7	. \$	1,100.00
8.	Child	dcare and d	children's education costs	8	. \$	0.00
9.	Cloth	hing, laund	ry, and dry cleaning	9	. \$	150.00
10.	Pers	onal care p	products and services	10	. \$	200.00
		-	ntal expenses	11	. \$	125.00
12.			. Include gas, maintenance, bus or train fare. ar payments.	12	. \$	750.00
13.			clubs, recreation, newspapers, magazines, and books	13	. \$	100.00
			ributions and religious donations	14	. \$	0.00
	Insur Do no	rance.	nsurance deducted from your pay or included in lines 4 or 20.	15a	. \$	0.00
	15b.	Health ins	urance	15b		0.00
	15c.	Vehicle in	surance	15c		400.00
	15d.	Other insu	rance. Specify:	15d	. \$	0.00
	Spec	ify:	clude taxes deducted from your pay or included in lines 4 or 20.	16	. \$	0.00
17.			ease payments:	47-	Φ.	075.00
			ents for Vehicle 1	17a	·	375.00
			ents for Vehicle 2	17b		0.00
		Other. Sp	<u> </u>	17c		0.00
4.0		Other. Sp	·	17d	. \$	0.00
	dedu	icted from	of alimony, maintenance, and support that you did not report your pay on line 5, Schedule I, Your Income (Official Form 106		· -	0.00
19.			s you make to support others who do not live with you.	40	\$	0.00
20	Spec		anticomponent included in lines 4 on F of this forms on on Co	19		
20.			erty expenses not included in lines 4 or 5 of this form or on So s on other property	nedule I: Y 20a		0.00
		Real estat		20a 20b		
						0.00
			homeowner's, or renter's insurance	20c 20d		0.00
			nce, repair, and upkeep expenses		·	0.00
0.4			er's association or condominium dues	20e	· <u> </u>	0.00
21.		r: Specify:	Auto Maintenance	21	. +\$	150.00
		dren's Ac	tivities		+\$	125.00
	Toba	ассо			_+\$	50.00
22.	22a.	Add lines 4	monthly expenses through 21. 2 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$ *	6,326.14
			a and 22b. The result is your monthly expenses.		\$	6,326.14
23.	Calc	ulate your	monthly net income.			
		•	12 (your combined monthly income) from Schedule I.	23a	. \$	7,596.62
			monthly expenses from line 22c above.	23b	\$	6,326.14
		1,7,7	, ,			
	23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c	. \$	1,270.48
24.	For exmodifi	xample, do yo ication to the 0.	an increase or decrease in your expenses within the year after ou expect to finish paying for your car loan within the year or do you expect y terms of your mortgage?	you file thi	s form? payment to incre	ease or decrease because of a
	□ Ye	es.	Explain here:			

Fill in this information to identify your case:					
Debtor 1	Daniel K. Holt				
	First Name	Middle Name	Last Name		
Debtor 2	Sandee E. Larsen				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY TRENTON VICINAGE		
Case number	18-34290-MBK				
(if known)	10 04200 MBR				
,					

 Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

o help you fill out bankruptcy forms?	
	ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
X <u>/s/</u> Sandee E. Larsen Sandee E. Larsen	n and
Signature of Debtor 2	
ary	Sandee E. Larsen